


COOK COUNTY
30 12

STATE OF ILLINOIS
DEPARTMENT OF ENVIRONMENT

 POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT PART 1 - SITE INFORMATION AND ASSESSMENT				I. IDENTIFICATION	
II. SITE NAME AND LOCATION				01 STATE 02 SITE NUMBER IL 980497804	
01 SITE NAME (Legal, common, or descriptive name of site) Dump in Markham		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 162nd St and Dixie / Western			
03 CITY Markham		04 STATE IL	05 ZIP CODE 60426	06 COUNTY Cook	07 COUNTY CODE 031
09 COORDINATES		08 CONG DIST 2			
LATITUDE 41 35 30		LONGITUDE 87 40 20			
10 DIRECTIONS TO SITE (Starting from nearest public road) exit 2945 onto Dixie Hwy south - to 162nd - west onto to Western - south onto - to site					
III. RESPONSIBLE PARTIES					
01 OWNER (If known) S.G. Hayes Company		02 STREET (Business, mailing, residential) 162nd + Western			
03 CITY Markham		04 STATE IL	05 ZIP CODE 60426	06 TELEPHONE NUMBER (312) 331-3380	
07 OPERATOR (If known and different from owner)		08 STREET (Business, mailing, residential)			
09 CITY		10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()	
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input type="checkbox"/> A. RCRA 3001 DATE RECEIVED: ____/____/____ <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ <input checked="" type="checkbox"/> C. NONE					
IV. CHARACTERIZATION OF POTENTIAL HAZARD					
01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE <u>12 17 80</u> <input type="checkbox"/> NO MONTH DAY YEAR		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____			
02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION BEGINNING YEAR <u>1980</u> ENDING YEAR <u>1981</u> <input type="checkbox"/> UNKNOWN			
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED None present, known of, nor alleged					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION Unknown					
V. PRIORITY ASSESSMENT					
01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents) <input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspect on time available basis) <input checked="" type="checkbox"/> D. NONE (No further action needed, complete current disposition form)					
VI. INFORMATION AVAILABLE FROM					
01 CONTACT Bonnie Elder		02 OF (Agency/Organization) IEPA		03 TELEPHONE NUMBER (312) 345-9780	
04 PERSON RESPONSIBLE FOR ASSESSMENT Bonnie Elder		05 AGENCY IEPA	06 ORGANIZATION	07 TELEPHONE NUMBER (312) 345-9780	08 DATE 5 25 84 MONTH DAY YEAR

EPA FORM 2070-12 (7-81)

EPA Region 5 Records Ctr.



311397



A TOXIC	E. SOLUBLE	I HIGHLY VOLATILE
B CORROSIVE	F. INFECTIOUS	J EXPLOSIVE
C RADIOACTIVE	G FLAMMABLE	K REACTIVE
D PERSISTENT	H IGNITABLE	L INCOMPATIBLE
		M NOT APPLICABLE

EPA FORM 2070-12 (7-81)



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
ILD 980497804

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ B. SURFACE WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ C. CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ E. DIRECT CONTACT 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ F. CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) 04 NARRATIVE DESCRIPTION

01 ☐ G. DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ H. WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ I. POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
ILD 980497304

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (Include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills, runoff, standing liquids, leaking drums)

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

S.G. Hayes Co. was not owner of site at time of open dumping.
Land was in trust with LaSalle Nat'l Bank in Chicago.

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)

IEPA files

Dump in Mackham

I agree with the state on this site.

L.D.



TO: Division File DATE: 5.25.84
FROM: B. Eleden ☒ Information only
SUBJECT: ILD980497304 03117702 ☐ Response requested
Cook County Markham / Dump in Markham

A preliminary assessment has been completed for this site. Its history is as follows: as the result of a complaint, the site was 1st inspected on 12-17-80. Observed at location of 162nd and Duie / Western, was an area of approximately 90x90 yds that was an open dump. City of Markham garbage (packer & otherwise) trucks plus private citizens had been using the area to dump a variety of solid wastes - such as, bagged waste, landscape waste, cardboard, cans, bottles, scrap metal, old furniture, foam rubber, tires, paper, bricks, plasterboard, concrete & asphalt chunks. No liquid nor possibly hazardous wastes were observed. The 11-4-81 inspection revealed that the site had been cleaned up & that the S. G. Hayes Co. had purchased the property with plans for building an asphalt plant, which is now in operation. Due to the nature of this site, a priority assessment of "none" was determined.

POTENTIAL HAZARDOUS WASTE SITE
POST PRELIMINARY ASSESSMENT
RATIONALE FOR FINAL STRATEGY DETERMINATION

IDENTIFICATION NUMBER

980497 804

SITE NAME Dump in Markham		ADDRESS 162nd St. and Dixie/Western			
CITY Markham	STATE Illinois	ZIP CODE 60426	COUNTY Cook	COUNTY CODE 031	CONG DIS 2
DATE REC'D MONTH / DAY / YEAR		DATE COMPLETED MONTH / DAY / YEAR		PRE HRS SCORE	

PLEASE CIRCLE CORRECT CODE

- 402 RCRA TSD - Permitted or closure candidates not to be listed. Excluded by policy.
- 412 UST - Under RCRA, leaking underground storage tanks. Gasoline and petroleum products including used oil. NOTE: waste oil is CERCLA eligible.
- 401 Oil/gas - Natural gas, natural gas liquids liquefied natural gas, synthetic gas usable for fuel. Petroleum, crude oil or any fraction thereof.
- 407 Federal Facility - Federal agency financed from appropriations to the agency not Superfund. Investigated under Installation Restoration Program. (Department of Defense or similar program.) Excluded by policy.
- 408 Mining - Until HRS revision is completed by April 1988, sites cannot be scored. Dat is usually high volume, low toxicity wastes. Wastes include those from mining; exploration, development or production of crude oil, natural gas or geothermal ener and dust from cement kilns.
- 410 FIFRA - Application of pesticides registered under FIFRA, or the handling and storge of such a pesticide by an agricultural prodcuer. Excluded by policy.
- 416 Radiation - Releases of source, by product or special nuclear material. Covered under Section 170 of Atomic Energy Act, Nuclear Regulatory Commission (NRC), Uranium Mill Tailings Radiation Control Act (UMTRCA). Excluded by statute.
- 414/415 Special Wastes - Such as, brine, animal feed, and grain elevators are not covered under current HRS model. Excluded by policy.
- 411 Fly-Ash - With respect to sites with substantial volumes of fly ash and others wastes from coal and fossil fuels burning. Can not use until HRS is revised in April 1988. Can not base evaluation made principally on the volume of those wastes but rather on the concentrations of the hazardous constituents of the waste.
- 409 TSCA - Permitted or candidates not to be listed. Excluded by policy.
- 403/413 Non Hazardous Substances - Substances not meeting the definition of being hazardous
- 404/405/406 SITE REQUIRED NO ADDITIONAL RESPONSE.

NFA
5E0401-A0404,405,406

FURTHER RESEARCH AND ANALYSIS REQUIRED, RECOMMEND SITE INSPECTION

REPAIRER NAME

Nina M. Moore

FILE

Summer Aiche

DATE

8/18/87

NAME OF SUPERFUND COORDINATOR

William D. Messenger

DATE

11 JUL 1988